

OTHER JOINT VENTURE PARTICIPANTS (DO NOT INCLUDE SUBMITTING ORGANIZATION)

1. NAME AND ADDRESS OF PARTICIPANT		2. DUN AND BRADSTREET NUMBER	
		3. TYPE OF ORGANIZATION (CHECK ALL THAT APPLY) <input type="checkbox"/> PROFIT - SMALL BUSINESS <input type="checkbox"/> FOREIGN-OWNED U.S. SUBSIDIARY <input type="checkbox"/> PROFIT - MEDIUM SIZE BUSINESS <input type="checkbox"/> UNIVERSITY <input type="checkbox"/> PROFIT - LARGE BUSINESS <input type="checkbox"/> GOVERNMENTAL LABORATORY <input type="checkbox"/> NON-PROFIT INDEPENDENT RESEARCH ORGANIZATION	
4. NAME OF CONTACT	5. TELEPHONE NUMBER	6. FAX NUMBER	7. E-MAIL ADDRESS

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